

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004111

FILED
Apr 28, 2009
Secretary of State

Entity Name: KEEP SEMINOLE BEAUTIFUL, INC.

Current Principal Place of Business:

5703 RED BUG LAKE ROAD #248
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

5703 RED BUG LAKE ROAD #248
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number: 20-8906282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARR, MICHAEL
5703 RED BUG LAKE ROAD #248
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BARR, MICHAEL
Address: PO BOX 4243
City-St-Zip: WINTER PARK, FL 32793

Title: V () Delete
Name: CLIFFORD, MARK
Address: 1824 LANDING DRIVE APT G
City-St-Zip: SANFORD, FL 32771

Title: T () Delete
Name: CLOSSEN, CRAIG
Address: PO BOX 2148
City-St-Zip: GOLDENROD, FL 32773

Title: S () Delete
Name: BERRYMAN, LESLEE
Address: 1010 WILLA LAKE CR
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL BARR

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date